CHAPTER VIII: RELATIONSHIP BETWEEN SPIRITUALITY AND HEALTH EMERGES

I want to close with a final thought that in a sense goes beyond the immediate historical material that I've just presented, but is, I hope you'll agree, is linked to it. I've made a lot of fuss about the fact that we've got here four discrete claims, and that unpacking the spirituality health link is a good thing to arm us to think well about it. But now I want to ask a kind of different question. Given that there are all these four claims and given that the ability to see these four claims as opposed to being tempted by the more global vision of the spirituality-health link allows us to think more clearly about it, why aren't people saying this? Why do so many scientific researchers, authors of popular books, directors of research, persist in pushing the global vision, the vision that there's a link between something we're calling "spirituality" and something we're calling "health." And the answer that I want to propose is that--what I want to suggest is that the answer lies actually less in medical reasons or scientific reasons, it lies in the realm of ethics and realm of culture. And this is how I see what's going on. When people talk about a link between spirituality and health, it seems as if you're setting, side-by-side, beside one another, two values very dear in very different ways to our culture, you're setting them along beside each other in ways that could imply--and to many people in fact do seem to imply--some kind of potential for a partnership for some kind of alliance between these two cultural values. And what people then go on to envision, once they imagine some kind of partnership, are things like an overcoming of false dualisms between mind and body, a dissolution of the sharp distinctions that we currently impose between the work of pastors on the one side, the work of doctors on the other, even new kinds of formal cooperation between the good work of the churches and the good work of the medical professions. And why is this such an attractive idea? Well the reason you hear most often--and that actually interests me personally the most--is that people think it would be a wonderful thing because it would somehow have the effect of creating something that we all know that our patients want: a medicine that's concerned not just with cure, but with caring, a medicine that knows that patients are more than just broken down

machines like automobiles that need fixing, a medicine that's prepared to engage with patients as whole people, body, and soul.

Howard Koenig who is one of the directors of a center for spirituality and health research at Duke University has been one of the most vocal advocates of this view. And this is what he has to say. This is in the forward to a gigantic volume that was published in 2001, oh, sorry, 2000, *The Handbook of Religion and Health*, that reviews the evidence for the spirituality for the spirituality-health link in more than 1600 empirical studies. But here, he says, is why it's all worthwhile. "Patients want," he says, "the technical competence of modern medicine but modern medicine has forgotten about the other things. It's forgotten about their psychological and spiritual needs. We've have had a very successful run", he says, "with scientific medicine, but now we need to go back and reconnect, rediscover, the ancient and venerable tradition, he says, of the doctor as healer. We need to see how to do this practically at the bedside so that patients feel cared for, held in a compassionate setting."

Now what should we think about this? Whenever I try to decide what I think about this, I find myself drawn to the words of Anatole Broyard who was an essayist and journalist for *The New York Times*, who in the 1990s was dying of cancer, and wrote a series of very moving meditations on his experience with high tech medicine for *The New York Times*, and in one of these meditations he had this to say: "I wouldn't demand a lot of my doctor's time, but I just wish he would brood upon my situation for perhaps five minutes, that he would give me his whole mind at least once, be bonded with me for a brief space, survey my soul as well as my flesh to get at my illness. For each man is ill in his own way. Just as he orders blood tests and bone scans of my body, I'd like my doctor to scan me, to grope for my spirit as well as my prostate. Because without such recognition, I am nothing but my illness." Now, Koenig--this is surely the kind of patient that Koenig means. And this is surely the kind of patient that Koenig wants to help. But do we agree that his solution--more and better research into the link between spirituality and health--is the way to help? Would Broyard have wanted his doctor to tell him that maybe he should think about praying because it might help his cancer. Or maybe he should consider going

to church because it might be good for his health, even assuming, which actually wasn't the case, that he was a religious person? And it's clear to me that he wouldn't have wanted that. What he says he wants is something quite different. He wants his doctor to stop trying to fix him and instead to just spend a little time beholding him as he is; listening to what's in his soul; listening to his efforts to make meaning of his experience. He didn't want research on the spirituality and health connection because that research isn't about meaning, it's about making better. It's still about fixing. In the end, therefore, it misses Broyard's real point.

And I think realizing this leads to a further recognition--that's the last point I want to make today--that there probably are not one, but two ways to think about the relationship between spirituality and health. One in which spirituality itself becomes a kind of medicine that's integrated into the therapeutic of instrumentalist goals of medicine, but another in which acts that we might consider spiritual in nature--acts of communion, of passion, of contemplation--are valued expressly for their ability to act as moral leavens or even as moral antidotes to medicine's relentless instrumentalism. Now, maybe we don't have to choose between these two kinds of visions, but I do think we have to be careful not to confuse them. And so with that final remark, I'll stop. Thank you very much.